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United the Paperwork Reduction Act of 1995, no persons are required to recoond to a collection of information unless 8 displays s/raid OMB control number. PATENT APPLICATION FEE DETERMINATION RECORD Applogito Substitute for Form PTO-875 Effective December 8,:2004 APPLICATION AS FILED - PART I OTHER THAN (Column 1) OR SMALL ENTITY (Column 2) SMALL ENTITY FOR NUMBER FLED HUMBER EXTRA RATE (T) FEE AS RATE (1) FEE (I) BASIC FEE NA N/A (37 CFR 1.16(a), (b), or (c)) 150.00 NA 300.00 SEARCH FEE · N/A N/A (37 CFR 1 16(1), (1), or (m)) N/A \$250 N/A \$500 EXAMINATION FEE NA . N/A NA \$100 (17 CFR 1.16(d, 6) a (d) NIA \$200 TOTAL CLAMS X\$ 25 (D) OFR 1.16(1) minus 20 e X\$50 OR INDEPENDENT CLAIMS X100 minus 3 e (37 OFR 1.16(N) X200 If the specification and drawings exceed 100 APPLICATION SIZE sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each (JT CFR 1.16(a)) additional 60 sheets or traction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). +180= MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(1)) +360= "If the difference in column 1 is less than zero, enter "O" in column 2. TOTAL TOTAL APPLICATION AS AMENDED - PART II OTHER THAN OR (Column 1) (Column 2) (Column 3) SMALL ENTITY SMALL ENTITY CLAIMS HIGHEST REMAINING PRESENT MULMER RATE (1) ADDI -RATE (S) AFTER PREVIOUSLY ADOL EXTRA TIONAL AMENDMENT TONAL **PAID FOR** FEE (1) 20 FEE (1) Total Minus DI CER LINE XS 25 X\$50 OR Endependent PT CFR LIGATE Minus 0 X100 X200 ū OR Application Size Fee (37 CFR 1.16(s)) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (17 CFR 1.140) +180= +360 OR TOTAL TOTAL ADD'L FEE OR ADO'L FEE (Column 2) (Column 1) (Column 3) CLAIMS HIGHEST REMAINING PRESENT NUMBER RATE (5) ADDI-RATE (S) ADD: AFTER PREVIOUSLY EXTRA TIONAL MENDMENT TIONAL PAID FOR FEE (1) FEE (1) Total Minus X\$ 25 X\$50 OR ٠. . Independent (27 CFR 1.180.) Minus X100 X200-OR Application Size Fee (37 CFR 1.16(s)) FIRST PRESENTATION OF MALTIPLE DEPENDENT CLAIM (37 CFR 1.160) +180= +360z OR TOTAL TOTAL OR ADO'L FEE If the entry in column 1 is less than the entry in column 2, write 'O' in column 3.

"If the "Highest Number Previously Paid For' IN THIS SPACE is less than 20, enter '20'.

"If the "Highest Number Previously Paid For' IN THIS SPACE is less than 3, enter '20'.

The "Highest Number Previously Paid For' (Total or independent) is the highest number found in the appropriate box in column 1.

This collection of Information is required by 97 CFR 1.16. The information is required to obtain or retain a barried by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to completed, including eathering and submitted the completed application from to the USPTO. Time will vary departing upon the individual case. Any comments ADD'L FEE

including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the emount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patient and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.